

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006279

FILED  
Feb 23, 2009  
Secretary of State

Entity Name: INFORMATION INTERNATIONAL ASSOCIATES, INC.

## Current Principal Place of Business:

P.O. BOX 4219  
OAK RIDGE, TN 37831

## New Principal Place of Business:

1055 COMMERCE PARK DRIVE  
STE 110  
OAK RIDGE, TN 37830

## Current Mailing Address:

P.O. BOX 4219  
OAK RIDGE, TN 37831

## New Mailing Address:

FEI Number: 62-1500232      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARDNER, STEVE  
EGLIN CCSS  
108 N MCCARTHY AVE STE 1  
EGLIN AFB, FL 32542 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: CARROLL, BONNIE C  
Address: 10805 FOX PARK  
City-St-Zip: KNOXVILLE, TN 37931

Title: S ( ) Delete  
Name: COOPER, ROY  
Address: 10805 FOX PARK  
City-St-Zip: KNOXVILLE, TN 37931

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HEATHER CASTLEBERRY

COMP

02/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date